

Name (Printed)

## CITY OF NEWPORT BEACH

REVENUE DIVISION 100 CIVIC CENTER ◆ P.O. BOX 1768
NEWPORT BEACH, CA 92658-8915
(949) 644-3141
RevenueHelp@newportbeachca.gov http://www.newportbeachca.gov/Revenue

## LIVE ENTERTAINMENT PERMIT APPLICATION

\$156 application fee due upon submission. Make check payable to City of Newport Beach

OFFICE USE ONLY
Permit Number
Master ID

	. payable to only o	Tronport Boas	<i>"</i> "		
ENTERTAINMENT ENTERPRISE INFORMATIO					
Name:					Cuita
Address:					
City:			Pn	one:	
Legal Description of Parcel:					
	Date Enterprise Acquired: Date of Commencement:				
* Attach a Site Plan describing the building and/o dimensioned interior Floor Plan.	r unit proposed fo	r the entertainn	nent establish	ment <u>and</u>	a fully
Describe all proposed entertainment activities. At	ttach additional sh	eets if necessa	ry.		
Indicate anticipated occupancy	ed? Yes Yes				If this is a attach
Name					
Address					
		ZipPhone			
City Stat	е	Ζιρ	FI	ione	
Name	Alias(es) DL#_				·
Address	Sui		te		
City Stat					
Have any of the owners previously operated any		•			Yes
If Yes, has any owner ever had the license or per		•			Yes
If Yes, explain					
Provide the name under which the owner operate	ed that was subjec	t to the action.			
Is the Premises rented, leased, or being purchase	ed under contract	?		No	Yes
If Yes, attach a copy of the lease or contract.					
<b>DECLARATION</b> I HEREBY CERTIFY THAT I INTEND TO AND T REQUIREMENTS OF SECTION 5.28.0410F TH				TIONAL	
UNDER THE PENALTY OF PERJURY, I CERTIF CONTAINED IN THIS APPLICATION AND THAT READ AND UNDERSTAND THE PROVISIONS (	Γ IT IS TRUE AND	CORRECT. I I	FURTHER CE	RTIFY T	HAT I HAVE

Signature

Title

Date